

June 22, 2004

This Quality Assurance review of the YWCA covers all services provided under the contract with Developmental Disabilities Program (DDP). The YWCA contracts with the Developmental Disabilities Program to provide Supported Living (SL) and Community Support (CS) Services. Random samples of individuals in these 2 service categories were reviewed. The review was completed during the months of March, April and May and cover the preceding year.

ADMINISTRATIVE

Some of the accomplishments of the YWCA that include individuals in both SL and CS are as follows:

Regular social activities are organized and provided quarterly - a Christmas dinner party, a spring dance, a trip to the Big Timber water slide and an agency picnic.

The sexual assault coordinator offered training to staff and individuals in services in Billings on personal safety.

Individual's with developmental disabilities were represented in the balloon release with a special colored balloon. This activity is designed to educate the community about victims of abuse in the community.

The YWCA has set a goal in their strategic planning to increase the skills training individuals receive.

The YWCA has a three year national accreditation from CARF. We really appreciate the house keeper position and believe that she provides an invaluable service to the individuals in the SL services.

DDP received the YWCA's year end financial reports on 9/10/03, for fiscal year ending 6/30/03 in advance of the due date. There were no identified issues nor problems with the report. On January 08,2004, DPHHS Audit Bureau issued their desk review of the YWCA's Independent Audit Report of FYE June 30,2003. The desk review revealed that the audit was acceptable and that there were no material findings nor questionable costs.

The YWCA is to be commended for completing staff, consumer and stakeholder surveys as well as strategic planning for the program. The stakeholder survey showed 75% satisfaction with services. The staff survey show generally positive responses (between 71% to 95%) with a substantial number of people being undecided on each question (from 7%-36%). Of note, 95% of the staff felt they had the training they needed to do their job - this is a great verification that the training systems set up address the items that are important to staff. The areas that concerned staff are their benefits and the receipt of positive feedback from management.

Appendix I items are in the process of being completed. Training occurred regarding the new IP rule with staff and included using assessments to establish goals and objective and writing measurable objectives. We have discussed scheduling a MANDT class for the new staff later this year; a class was held last fiscal year.

RESIDENTIAL (SL)

Some items of note specific to the SL program are as follows:

DDP really appreciates the YWCA's extra efforts with individuals who go through difficult times - daily calls have been put in place to help individuals remember to take their medications on schedule, the YWCA has always been willing (with extra funding) to hire extra staff to work with individuals in crisis. Staff stayed with individuals overnight to insure their safety and one to one staff have been hired for two individuals who were not safe.

The program director worked for two weeks in the Grand office to better get a handle on the job demands that may relate to turnover and identify best practices for this area of the program.

The woman's shelter offered to accept an individual who needed to leave her apartment due to abuse by another person in services.

Health and Safety

Medication records were complete and all individuals assisting with medications were certified. Even though medication errors for the last 3 quarters have been stable, it would be nice to see a reduction in overall errors. With this in mind I reviewed the training new individuals are getting prior to giving medications at the Grand Office. I am recommending that supervisory staff observe all new staff prior to them assisting individuals with medications on their own. This should be added into policy and become a part of the on site training checklist.

The five apartments I visited were neat, had smoke alarms and fire extinguishers. All individuals lived in apartments with 2 exits or had choice forms documenting that it was the individual's choice not to. Both the staff and individuals in services were aware of how to access back up emergency help from the YWCA.

Service Planning and Delivery

All individuals in the sample had IPs which were based on assessments. Most objectives were directly tied to the individual's long range goals. Objectives were implemented for 4/5 of the individuals as planned. QAOS sheet 5 addresses the 5th individual. Quarterly reports for the individuals at the Grand office were submitted for 3 out of the 4 quarters; this has been addressed in QAOS sheet 3.

Individuals in services are actively involved in the community.

Staffing

Staff were well are of the rights and responsibilities individuals in service have; they knew who and how to report suspected abuse, neglect or exploitation; they were aware of the best practices of emotional responsible care giving; and when and what to report in an incident report. Staff did not know that medications administration needed to be verified each time an individual receive a new med or moved.(QAOS sheet 6). As a result of the QAOS sheet the medication policy has now been rewritten.

Background checks have not been completed for staff prior to working with individuals - see QAOS sheet FY04-1. The agency will now complete checks electronically and they believe this method will allow the check to be completed prior to staff working alone with an individual. All staff sampled completed the general orientations in a timely manner. There was lack of documentation that the onsite part of the preservice training occurred for some of the new employees - see QAOS sheet 4.

The turn over in the Grand office portion of the program is of concern to this office. While numerous joint attempts have been made to address this area, a reduction in turnover has not occurred. Perhaps an outside consultant should review this situation and make recommendations.

Incident Management

The YWCA is excellent at reporting incidents as required by our rules. The reports receive by APS have had to do with client to client problems or problems involving community members. In all cases the YWCA staff have worked closely and in conjunction with APS and IP teams to resolve each situation. I appreciate the extra efforts by staff to resolve these crisis situations. New financial procedures have been put into effect to more closely monitor individual cash to prevent missing funds.

COMMUNITY SUPPORTS

The YWCA serves 3 individuals through community supports. All 3 individuals were a part of this review. At this time the services are very much like their supported living services so that the finding from above are in general repeated for this program of service.

Health and Safety

All individuals are served in their own apartments. Each of these apartments was neat when I visited. Smoke detectors and fire extinguishers were present in all sites. Both individuals and staff were aware of how to access back up assistance for the YWCA. The flexibility of this program has help address an individual's respiratory problems by purchasing a HEPPA filter and a lift chair was purchased for another individual.

Service Planning and Delivery

All IPs were based on assessments. Most objectives were directly tied to the individual's long range goals. Objectives were consistently documented as implemented for one of the individuals. QAOS sheet 5 addresses the lack of objective documentation for the other 2 individuals. The quarterly report for one of these individuals was also missing; this was addressed in QAOS sheet 3.

Individuals in services are actively involved in the community.

Staffing

All staff sampled completed the general orientations in a timely manner. Background checks have not been completed for staff prior to working with individuals - see QAOS sheet 1. The agency will now complete the background check electronically and they believe this method will allow the check to be completed prior to staff working alone with an individual.

Staff were well are of the rights and responsibilities individuals in service have; they knew who and how to report suspected abuse, neglect or exploitation; they were aware of the best practices of emotional responsible care giving; and when and what to report in an incident report. Staff were not able to answer the questions on what proceeds are allowed to be used with individuals who have behavioral emergencies or

how often an emergency procedure could be used. Staff did not know that medications administration needed to be verified each time an individual receives a new med or moved (QAOS sheet 6). Again, a new policy has been developed to address this.

Incident Management

The YWCA is excellent at reporting incidents as required by our rules. Incidents are then reviewed by an internal committee. There have been no reports to APS about the individuals in community supports.

Conclusion

The YWCA assist people to live independently in apartments or their family homes and facilitates individuals to be an active part of the community. This is accomplished with very minimal budgets for each individual.

When problem arise and are brought to the YWCA carefully thought out plans are put into place to correct the problem. I appreciate this openness to address areas of concern.

I found 5 areas for improvement as addressed in the QAOS sheets

1. More timely background checks.
2. On site training for new staff at the Grand Office.
3. Better documentation of IP objectives
4. Completion of internal checks of all IP objectives through the Quarterly review system.
5. Staff training in the aversive policy and medication clarification.

I have accepted the corporations plan to correct all of these items and will follow up on progress in these areas through out the year.

I want to thank your staff for their time and assistance in scheduling visits so that I could complete this review.